SEALED BID

Project: Whitetail Reservoir Dam Weir
Repair
MT FWP Number: 7073704
Name of Contractor:
Address:
Dept. of Labor & Industry Cert. of Reg.#.
Acknowledges Addendum No.:

Phil Jagoda, P.E, Project Manager Montana Fish, Wildlife and Parks Design and Construction 1522 Ninth Avenue P.O. Box 200701 Helena, Montana 59620-0701

PROPOSAL

FWP Project #: 7073704

Montana Fish, Wildlife & Parks Design and Construction PO Box 200701, 1522 Ninth Avenue Helena, Montana 59620-0701

The undersigned, having familiarized himself with the conditions of the work and the contract documents as prepared by FWP, **Phil Jagoda**; **P.O. Box 200701 Helena, Montana 59620-0701**; **Phone (406) 841-4009** agrees to furnish all labor, materials, equipment, and services necessary to complete all general construction work, as bid herein, for a project entitled **Whitetail Reservoir DAM Weir Repairs** in accordance with the Contract Documents including all Addenda. Bidder agrees to perform all work described below at the price shown as follows:

Reminder to Contractors: All Unit Prices <u>must</u> be filled in on the Bid Form for a valid bid (18-2-303 MCA).

BASE BID:

Item #	Description	Estimated	Unit	Unit Price	Total		
		Quantity	Measure		Amount		
1	Mobilization/Demobilization, Bonding	1	LPSM				
	& Insurance			\$	\$		
2	Remove & Reinstall Existing Riprap	1	LPSM	\$	\$		
3	Furnish & Install 10 oz. non-woven	1,500	SQ.FT.				
	geotextile			\$	\$		
4	Salvage & Reinstall Weir Pile Caps	1	LPSM	\$	\$		
5	Drive Existing Sheet Piles to Design	1	LPSM				
	Elevations			\$	\$		
6	Furnish & Install H-piles	216	LF	\$	\$		
7	Furnish & Install Steel Angle Bracing	267	LF	\$	\$		
8	Weld Existing Sheet Pile Vertical	468	LF				
	Joints			\$	\$		
9	Furnish & Install New Sheet Pile	55	SQ.FT.				
	Extensions			\$	\$		
10	Seed & stabilize disturbed areas	1	LPSM				
				\$	\$		
	Total: <u>\$</u>						

BASE BID:		
AND	/100 DOLLARS (\$)

Contractor Name: _____ Proposal Page 1 of 2

And certifies that he is a duly and regularly licensed contractor registered with the Montana Department of Labor and Industry:						
FIRM NAME:						
TELEPHONE#						
SIGNED BY:		DATE:	REG. #			
BUSINESS ADDRESS						
EMAIL ADDRESS:						
ADDENDUM NO	DATE:					
ADDENDUM NO I	DATE:					
ADDENDUM NO I	DATE:					